# FORM D



# UNITED STATES SECURITIES AND EXCHANGE COMM Washington, D.C. 20549

### FORM D

#### NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

| 0/00    | OMB APPROVAL                                   |  |  |  |  |  |
|---------|--|--|--|--|--|--|
| IISSION | OMB Number: 3235-0076<br>Expires: May 31, 2005 |  |  |  |  |  |
|         | Estimated average burden                       |  |  |  |  |  |
|         | hours per response 16.00                       |  |  |  |  |  |

| SEC    | USE O  | NLY  |      |
|--------|--------|------|------|
| Prefix |        | Se   | rial |
| DAT    | E RECE | IVEC | )    |

| Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  |
|---|
| 7.5% Convertible Notes Due April 14, 2008 and Warrants, both convertible into common stock, \$0.01 par value, of Zoltek Companies, Inc.  Filing Under (Check box(es) that apply):  Rule 504 Rule 505 Rule 506 Section 4(b) ULOE   |
| Type of Filing: New Filing  Amendment   |
| A. BASIC IDENTIFICATION DATA  |
| Enter the information requested about the issuer  |
| Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)  Zoltek Companies, Inc.  |
| Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (314) 291-5110   |
| Address of Principal Business Operations (Number and Street, City, State, Zip Code) Telephone Number (Including Area Code) (If different from Executive Offices) N/A  |
| Brief Description of Business   |
| The manufacture and marketing of applied technology and materials.  Nov 0 9 2004  |
| Type of Business Organization  ☐ corporation ☐ limited partnership, already formed ☐ other (please specify):  |
| business trust limited partnership, to be formed  |
| Actual or Estimated Date of Incorporation or Organization:    Month   Year  |
| Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)   |
| GENERAL INSTRUCTIONS  |
| Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).  |
| When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.  |
| Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.   |
| Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.   |
| Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.   |
| Filing Fee: There is no federal filing fee.   |
| State:  This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed. |
| ATTENTION   |
| Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice. SEC 1972 (2-97) 1 of 10  |

| A: BASIC IDENTIFICATION DATA  2. Enter the information requested for the following:  |         |
|--|---------|
| Each promoter of the issuer, if the issuer has been organized within the past five years;  |         |
| <ul> <li>Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of eq securities of the issuer;</li> </ul>  | uity    |
| • Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issued  | rs; and |
| Each general and managing partner of partnership issuers.  |         |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Pa  | rtner   |
| Full Name (Last name first, if individual) Rumy, Zsolt   |         |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044   |         |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Partner   |         |
| Full Name (Last name first, if individual)  Bealke, Linn H.  |         |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044   |         |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing Pa  | rtner   |
| Full Name (Last name first, if individual) Betts, James W.   |         |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044   |         |
| Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☑ Director ☐ ☐ General and/or ☐  | 18 9 P. |
| Full Name (Last name first, if individual) Dill, Charles A:  | s       |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044   |         |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  |         |
| Full Name (Last name first, if individual) Kardos, John L.   |         |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044   |         |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or  |         |
| Full Name (Last name first, if individual)  McDonnell, John F.   |         |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044  Charles Boy (co) that Apply Respective Properties Officer Residence Address (Number and Street, City, State, Zip Code) |         |
| Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Director General and/or Managing P   | artner  |
| Full Name (Last name first, if individual) Schott, Kevin J.  |         |
| Business or Residence Address (Number and Street, City, State, Zip Code) 3101 McKelvey Road, St. Louis, MO 63044   |         |
| (Use blank sheet, or copy and use additional copies of this sheet, as necessary)   |         |
| 2419074 2 of 10  |         |

| 100      | B. INFORMATION ABOUT OFFERING   |                     |
|----------|---|---------------------|
|          | Y   | es No               |
| 1.       | Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?   | $\sqsupset oxtimes$ |
|          | Answer also in Appendix, Column 2, if filing under ULOE.  |                     |
| 2.       | ·   | ,000.00             |
| 2        |   | 'es No<br>□ ⊠       |
| 3.<br>4. | Does the offering permit joint ownership of a single unit?  Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commis-  |                     |
| ٦.       | sion or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. |                     |
| Ful      | Name (Last name first, if individual)   |                     |
| Bus      | siness or Residence Address (Number and Street, City, State, Zip Code)  |                     |
| Nai      | ne of Associated Broker or Dealer   |                     |
| Sta      | tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers   |                     |
|          | (Check "All States" or check individual States)   | Il States           |
|          | [AL] [AK] [AK] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  |                     |
|          | [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  |                     |
|          | [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]   |                     |
|          | [M] [SC] [SD] [IN] [IX] [OI] [VI] [VA] [WA] [WV] [WI] [IR]  |                     |
| Ful      | l Name (Last name first, if individual)   |                     |
| Bu       | siness or Residence Address (Number and Street, City, State, Zip Code)  |                     |
| Na       | ne of Associated Broker or Dealer   | art                 |
| Sta      | tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers   |                     |
|          | (Check "All States" or check individual States)   | All States          |
|          | [AL] [AK] [AK] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  |                     |
|          | [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  |                     |
|          | [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA] [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]   |                     |
|          |   |                     |
| Ful      | l Name (Last name first, if individual)   |                     |
| Bu       | siness or Residence Address (Number and Street, City, State, Zip Code)  |                     |
| Na       | me of Associated Broker or Dealer   |                     |
| Sta      | tes in Which Person Listed Has Solicited or Intends to Solicit Purchasers   |                     |
|          | (Check "All States" or check individual States)   | All States          |
|          | [AL] [AK] [AK] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]  |                     |
|          | [IL] [IN] [IA] [KS] [KY] [LA] [ME] [MD] [MA] [MI] [MN] [MS] [MO]  |                     |
|          | [MT] [NE] [NV] [NH] [NJ] [NM] [NY] [NC] [ND] [OH] [OK] [OR] [PA]  |                     |
|          | [RI] [SC] [SD] [TN] [TX] [UT] [VT] [VA] [WA] [WV] [WI] [WY] [PR]  |                     |
|          | (Use blank sheet, or copy and use additional copies of this sheet, as necessary)  |                     |
|          |   |                     |

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| 1. | Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \( \square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.  |               |                         |                  |                             |
|----|---|---------------|-------------------------|------------------|-----------------------------|
|    | Type of Security  |               | ggregate<br>cring Price |                  | Already<br>old              |
|    | Debt  | \$            | 0                       | . \$             |                             |
|    | Equity  | \$            | 0                       | . \$             |                             |
|    | ☐ Common ☐ Preferred  |               |                         |                  |                             |
|    | Convertible Securities (including warrants)   | \$ 20,0       | 0.000,000               | <u>0 \$ 20,0</u> | 00,000.00                   |
|    | Partnership Interests   | \$            | 0                       | \$               |                             |
|    | Other   | \$            | 0                       | . \$             |                             |
|    | Total   | \$ <u>20,</u> | 0.000,000               | <u>0 \$ 20,0</u> | 00,000.00                   |
|    | Answer also in Appendix, Column 3, if filing under ULOE.  |               |                         |                  |                             |
| 2. | Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."            |               |                         |                  |                             |
|    |   | _             | Number<br>nvestors      | Dollar           | regate<br>Amount<br>rchases |
|    | Accredited Investors  |               | 2                       | \$20,0           | 0,000.00                    |
|    | Non-accredited Investors  |               | 0                       | \$               | <u> </u>                    |
|    | Total (for filings under Rule 504 only)   |               |                         | . \$             |                             |
|    | Answer also in Appendix, Column 4, if filing under ULOE.  |               |                         |                  |                             |
| 3. | If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.  |               |                         |                  |                             |
|    | Type of Offering  |               | Type of<br>Security     |                  | Amount<br>old               |
|    | Rule 505  | ~             | ,                       | \$               |                             |
|    | Regulation A  |               |                         | \$               |                             |
|    | Rule 504  |               |                         | -                |                             |
|    | Total   |               |                         | -                |                             |
| 4. | a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. |               |                         |                  |                             |
|    | Transfer Agent's Fee  |               |                         | ] \$             | ļ                           |
|    | Printing and Engraving Costs  |               |                         | ] \$             |                             |
|    | Legal Fees  |               | 🗵                       | \$ <u>30</u>     | 0,000.00                    |
|    | Accounting Fees   |               |                         | ] \$             |                             |
|    | Engineering Fees  |               | [                       | ] \$             |                             |
|    | Sales Commissions (specify finders' fees separately)  |               | [                       | ] \$             |                             |
|    | Other Expenses (identify) State filing fees and miscellaneous expenses  |               | 🗵                       | ] \$ <u>25</u>   | 0.00                        |
|    | Total   | •••••         | 🗵                       | \$ <u>300</u>    | ,250.00                     |

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

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| 835 | C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF   | PROCEEDS   |                  |                  |
|-----|---|--|------------------|------------------|
|     | b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."  |  | <u> 19,69</u>    | 9,750 .00        |
| 5.  | Indicate below the amount of the adjusted gross proceeds to the issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above. |  |                  |                  |
|     |   | Payments to<br>Officers,<br>Directors, &<br>Affiliates | Paym             | ents To<br>thers |
|     | Salaries and fees   |  | <b>s</b>         |                  |
|     | Purchase of real estate   | □\$ <u></u>  | <b></b> \$       |                  |
|     | Purchase, rental or leasing and installation of machinery and equipment   | □\$ <u></u>  | <b></b> \$       |                  |
|     | Construction or leasing of plant buildings and facilities   | \$   | <b></b> \$       |                  |
|     | Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)  |  | <b>\$</b>        |                  |
|     | Repayment of indebtedness   | <b>\$</b>  | ⊠\$ <u>12,0</u>  | 00.000.00        |
|     | Working capital   | \$   | <b>⊠\$</b> 7,69  | 9,750.00         |
|     | Other (specify):  | <b></b>  | □\$              |                  |
|     | Column Totals   | □\$ <u></u>  | ⊠\$ <u>19,</u> € | 99,750.00        |
|     | Total Payments Listed (column totals added)   | <b>⊠</b> \$ <u>1</u>                                   | 9,699,750        | 0.00             |
|     |   |  |                  |                  |

| The issuer has duly caused this notice to be signed by signature constitutes an undertaking by the issuer to furnished by the issuer to any non-accredit | urnish to the U.S. Securities and Exchange Commi | ssion, upon written request of its staff, the |
|--|--|---|
| Issuer (Print or Type)   | Signature  | Date  |
| Zoltek Companies, Inc.   | Lally  | 11/4/2004                                     |
| Name of Signer (Print or Type)   | Title of igner (Print or Type)                   |   |
| Zsolt Rumy   | Chief Executive Officer and President            |   |
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|  | ATTENTION  |   |
| Intentional misstatements or omiss   | ions of fact constitute federal criminal violati | ons. (See 18 U.S.C. 1001.)                    |
|  |  |   |
|  |  |   |
| 2410074  |  |   |

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D. FEDERAL SIGNATURE

| E. STATE SIGNATURE  1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?  See Appendix, Column 5, for state response.  2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on (17 CFR 239.500) at such times as required by state law.  3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the offerees.  4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited. |
|--|
| See Appendix, Column 5, for state response.  2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on (17 CFR 239.500) at such times as required by state law.  3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the offerees.  |
| <ol> <li>The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on (17 CFR 239.500) at such times as required by state law.</li> <li>The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the offerees.</li> </ol>   |
| <ul> <li>(17 CFR 239.500) at such times as required by state law.</li> <li>3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.</li> </ul>   |
| offerees.  |
| 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited  |
| Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.   |
| The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.  |
| Issuer (Print or Type) Signature Date  |
| Zoltek Companies, Inc.   |
| Name of Signer (Print or Type)  Title of Signer (Print or Type)  |
| Zsolt Rumy Chief Executive Officer and President   |
|  |
|  |
|  |

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

#### APPENDIX

| Intend to sell to non-accredited investors in State (Part Clem 2)   Type of investor and amount purchased in State (Part Clem 2)   Cyper Cle | 1     | ] 2    | 2        | 3                    |            |             | 4              |        | 5         |         |
|--|-------|--------|----------|----------------------|------------|-------------|----------------|--------|-----------|---------|
| Intend to sell to consequential and aggregate offering price of the price of t |       |        |          | Type of security     |            |             |                |        | Under Sta | te ULOE |
| State         Yes         No         See Part C Item 1         Amount Investors         Amount Investors         Amount Investors         Yes         No           AL         Image: Control of the part   |       | Intend | to sell  | and aggregate        |            | T           | 4              |        | (if yes.  | attach  |
| State         Yes         No         See Part C Item 1         Amount Investors         Amount Investors         Amount Investors         Yes         No           AL         Image: Control of the part   |       |        |          | offering price       |            | amount purc | hased in State |        | waiver s  | ranted) |
| State         Yes         No         See Part C Item 1         Accredited Investors         Amount Investors         Amount Investors         Amount Yes         No           AL         Image: Accredited Investors in the part of the part   |       |        |          | (Part C-Item 1)      |            | (Part C     | -Item 2)       |        | (Part E-  | Item 1) |
| AL   | State | Yes    | No       | See Part C<br>Item 1 | Accredited | Amount      | Non-Accredited | Amount | Yes       | No      |
| AZ   |       |        |          |                      |            |             |                |        |           |         |
| AR CA CO CO CT CT CO CT CT CO CT   | AK    |        |          |                      |            |             |                |        |           |         |
| CA   | AZ    |        |          |                      |            |             |                |        |           |         |
| CO   | AR    |        |          |                      |            |             |                |        |           |         |
| CT         DE  | CA    |        |          |                      |            |             |                |        |           |         |
| DE   | СО    |        | <u>-</u> |                      |            |             |                |        |           |         |
| DC         FL  | СТ    |        |          |                      |            |             |                |        |           |         |
| FL GA  | DE    |        |          |                      |            |             |                |        |           |         |
| GA         HI         HI<   | DC    |        |          |                      |            |             |                |        |           |         |
| HI   | FL    |        | _        |                      | _          |             |                |        |           |         |
| ID       IL       ID       ID <td< td=""><td>GA</td><td></td><td></td><td></td><td></td><td></td><td></td><td>:</td><td></td><td></td></td<>   | GA    |        |          |                      |            |             |                | :      |           |         |
| IL       IN       IN <td< td=""><td>HI</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></td<>  | HI    |        |          |                      |            |             |                |        |           |         |
| IN   | ID    |        |          |                      |            |             |                |        |           |         |
| IA       KS         KY       IA         LA       IA         ME       IA         MD       IA         MA       IA         MI       IA         MS       IA  | IL    |        |          |                      |            |             |                |        |           |         |
| KS   | IN    |        |          |                      |            |             |                |        |           |         |
| KY   | IA    |        |          |                      |            |             |                |        |           |         |
| LA   | KS    |        |          |                      |            |             |                |        |           |         |
| ME   | KY    |        |          |                      |            |             |                |        |           |         |
| MD   | LA    |        |          |                      |            |             |                |        |           |         |
| MA   | ME    |        |          |                      |            |             |                |        |           |         |
| MI   | MD    |        |          |                      |            |             |                |        |           |         |
| MN S S S S S S S S S S S S S S S S S S S   | MA    |        |          |                      |            |             |                |        |           |         |
| MS   | MI    |        |          |                      |            |             | -              |        |           |         |
|  | MN    |        |          |                      |            |             |                |        |           |         |
| MO MO  | MS    |        |          |                      |            |             |                |        |           |         |
|  | МО    |        |          |                      |            |             |                |        |           |         |
|  |       |        |          |                      |            |             |                |        |           |         |
|  |       |        |          |                      |            |             |                |        |           |         |

#### APPENDIX

| 1     | [  | 2  | 3  |                                      |  | 1  |        | 5   |    |
|-------|--|----|--|--------------------------------------|--|--|--------|-----|----|
| 1     | Intend to sell<br>to non-accredited<br>investors in State<br>(Part B-Item 1) |    | Type of security<br>and aggregate<br>offering price<br>offered in state<br>(Part C-Item 1) |                                      | Type of investor and amount purchased in State (Part C-Item 2) |  |        |     |    |
| State | Yes  | No | See Part C<br>Item 1   | Number of<br>Accredited<br>Investors | Amount   | Number of<br>Non-Accredited<br>Investors | Amount | Yes | No |
| MT    |  |    |  |                                      |  |  |        |     |    |
| NE    |  |    |  |                                      |  |  |        |     |    |
| NV    |  |    |  |                                      |  |  |        |     |    |
| NH    |  |    |  |                                      |  |  |        |     |    |
| NJ    |  |    |  |                                      |  |  |        |     |    |
| NM    |  |    |  |                                      |  |  |        |     |    |
| NY    |  | Х  | 7.5% Convertible<br>Notes and<br>Warrants;<br>\$20,000,000.00                              | 2                                    | \$20,000,000.00  | 0  |        |     | Х  |
| NC    |  |    |  |                                      |  |  |        |     |    |
| ND    |  |    |  |                                      |  |  |        |     |    |
| ОН    |  |    |  |                                      |  |  |        |     |    |
| OK    |  |    |  |                                      |  |  | •      |     |    |
| OR    |  |    |  |                                      |  |  |        |     |    |
| PA    |  |    |  |                                      |  |  |        |     |    |
| RI    |  |    |  |                                      |  |  |        |     |    |
| SC    |  |    |  |                                      |  |  |        |     |    |
| SD    |  |    |  |                                      |  |  |        |     |    |
| TN    |  |    |  |                                      |  |  |        |     |    |
| TX    |  |    |  |                                      |  |  |        |     |    |

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# APPENDIX

| 1     | Intend to non-actinvestors | to sell | Type of security and aggregate offering price offered in state Type of investor a amount purchased in |                                      | Type of investor and amount purchased in State |  |        |         |                     |
|-------|----------------------------|---------|---|--------------------------------------|--|--|--------|---------|---------------------|
|       | (Part B-                   | Item 1) | (Part C-Item 1)   |                                      | (Part C  | C-Item 2)                                |        | (Part E | granted)<br>Item 1) |
| State | Yes                        | No      | See Part C<br>Item 1  | Number of<br>Accredited<br>Investors | Amount   | Number of<br>Non-Accredited<br>Investors | Amount | Yes     | No                  |
| UT    |                            |         |   |                                      |  |  |        |         |                     |
| VT    |                            |         |   |                                      |  |  |        |         |                     |
| VA    |                            |         |   |                                      |  |  |        |         |                     |
| WA    |                            |         |   |                                      |  |  |        |         |                     |
| WV    |                            | 17      |   |                                      |  |  | ,      |         |                     |
| WI    |                            |         |   |                                      | -  |  | ·····  |         |                     |
| WY    |                            |         |   |                                      |  |  |        |         |                     |
| PR    |                            |         |   |                                      | · · · · · · · · · · · · · · · · · · ·          |  |        |         |                     |

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